

MATTINGLY, STANGER & MALUR, P.C.

ATTORNEYS AT LAW

1800 DIAGONAL ROAD, SUITE 370

ALEXANDRIA, VIRGINIA 22314

JOHN R. MATTINGLY
DANIEL J. STANGER
SHRINATH MALUR*

GENE W. STOCKMAN
OF COUNSEL

JEFFREY M. KEYCHUM
Registered Patent Agent

* Bar Membership Other Than Virginia

PATENT, TRADEMARK
AND COPYRIGHT LAW

FACSIMILE: (703) 684-1157

(703) 684-1120

Date: July 2, 2003

FACSIMILE COVER LETTER

Facsimile Number: 703-872-9310

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TC 1700

To: Examiner M. Angebrannndt
Group Art Unit 1756, USPTO

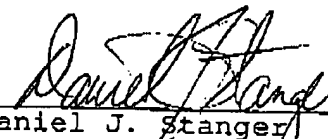
From: Mr. Daniel J. Stanger
MATTINGLY, STANGER & MALUR, P.C.

Re: USSN 09/810,474
Attorney Docket No.: ASA-991

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following listed documents are being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below:

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Date

Total Number of Pages (including cover sheet): 14

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FORM PTO-1083

PATENT

Case Docket No. ASA-991

In RE application of M. TERAQ et al

Serial No.: 09/810,474

Group Art Unit: 1756

Filed: March 19, 2001

Examiner: M. Angebranndt

For: INFORMATION RECORDING MEDIUM AND METHOD FOR
MANUFACTURING INFORMATION RECORDING MEDIUM

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Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
- ☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.
- ☒ No additional fee is required.

The fee has been calculated as shown below:

	(COL. 1)		(COL. 2)		(COL. 3)
	Claims Remaining After Amendment		Highest No. Previously Paid For		Present Extra
Total	- 20	Minus	** 20	-	0
Indep.	+ 3	Minus	*** 3	=	0
<input type="checkbox"/> First Presentation of Multiple Dependent Claims					

SMALL ENTITY

Rate	Additional Fee
x 9	\$
x 42	\$
+ 140	\$
Total	\$

OR

OTHER THAN A
SMALL ENTITY

Rate	Additional Fee
x 18	\$ 0
x 84	\$ 0
+ 280	\$ 0
Total	\$ 0

OR

- * If the entry in Col. 1 is less than the entry in Col. 2, write '0' in Col. 3.
- ** If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 20, write '20' in this space.
- *** If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, write '3' in this space.
- The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

- ☐ Please charge my Deposit Account No. 50-1417 in the amount of \$_____.
- ☐ A check in the amount of \$_____ is attached in payment of:_____
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1417.
- ☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR 1.17.
- ☒ Any Extension of Time fees that are necessary, which are hereby requested if necessary.

MATTINGLY, STANGER & MALUR, P.C.
1800 Diagonal Rd., Suite 370
Alexandria, Virginia 22314
(703) 684-1120By: Daniel J. Stanger
Registration No. 32,846
Attorney for Applicant(s)

Date: July 2, 2003